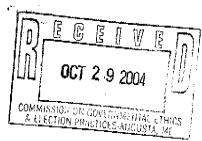
STATE OF MAINE COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES



Mail: 135 State House Station
Office: 242 State Street
Augusta, Maine 04333
Tel: (207) 287-4179 Fax: (207) 287-6775
www.maine.gov/ethics

CAMPAIGN FINANCE REPORT OF INDEPENDENT EXPENDITURES 2004 GENERAL ELECTION

Name of Person/Committee Making Expenditure(s) SENATE DEMOCRATIC CAM	2416N Comm 11
Mailing Address YMS 737 176 WESTERN AVE	
City, Zip Code August4 ME 04330 Telephone 626	9351
Instructions Please see previous page for reporting requirements. Complete notarized affida attached schedules.	avit and two
Filing Schedule Independent expenditures for the 2004 general election in excess of \$250 per must be reported to the Commission within 24 hours of making the ex Independent expenditures aggregating in excess of \$100, but not in excess of be reported to the Commission on October 12, 2004, October 27, 2004, or De 2004 (whichever occurs first after the expenditure).	penditures. \$250, must
Please check: (X) Report of Independent Expenditure over \$250 () October 12, 2004 Report of Independent Expenditure of \$250 or Less () October 27, 2004 Report of Independent Expenditure of \$250 or Less () December 14, 2004 Report of Independent Expenditure of \$250 or Less () Amendment to Earlier Report Dated: () Other (specify):	
	····
I CERTIFY THAT THE INFORMATION IN THIS REPORT IS TRUE, CORRECT COMPLETE. Signature of PAC or Party Treasurer, or Other Person Making Expenditure(s)	Z 1/04 Date

2072876775

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INDEPENDENT EXPENDITURES

AFFIDAVIT

STATE OF	MAINE		-
COUNTY OF	KENNEBEC		-
131	ENJAMIN GAANT	, being	duly sworn, says that he/she made each
of the expendit	ures listed in the attache	ed report independer	ently, and not in cooperation, consultation
or concert with	h, or at the request or	suggestion of, the	e candidates named in the report or the
authorized com	unittees or agents of the	candidates.	
		Sugar	K Gus
			(Signature of Affiant)
Sworn to before	e me, this 29 day of	October	2004.
Vine	iole		
(Notary Public/Att	torney at Law) July 10,	2009	•

Page____ of ____ (Schedule B-IE-1 only)

Schedule B-IE-1

CANDIDATE(S) SUPPORTED/OPPOSED

Please list all candidates that were the subject of independent expenditures. If more than one candidate was the subject of the expenditure, allocate the expenditure among the candidates.

Office sought by candidate (including district #)	Candidate's Name	Indicate whether expenditure was made in support of or in opposition to the candidate	Amount expended this reporting period for each caudidate
5033	JANE CRONK	SUPPORT	# 49.26
SDZI	SCOTT COWGER	SUPPORT	# 950
· ·			

Page___ of ___ (Schedule B-IE-2 only)

Schedule B-IE-2

ITEMIZATION - INDEPENDENT EXPENDITURES

Please indicate the date, payee, purpose and amount of each expenditure. If you are reporting an agreement or obligation to make a future payment, please note that in the margin.

Date of expenditure	Payee, address, zip code Purpose of expenditure	Amount	
10/28	DIRECT CONNECT STEATSGIES 14DI K ST NW STO 1000 WASHINGTON DC 20005	AUTOMATED PHONE	# 49.26
10/28	DURSO BEYCHOK 630 FORAL OT AGON POUGE LA 70807	PRINTING	# 950
,			
 Expenditures this page (Last page only Schedule B-IE-2) Total from attached pages (Schedule B-IE-2) Total expenditures this period 			# 999.26
			\$ 999.26